



## Application to Present a Breakout Session

McAllen 2020

**DEADLINE February 15, 2020**

**SAVE this form to your desktop first. Then open it, fill it in, save it and you'll be able to send it by email. Please fill this application out completely. You will be notified when your session is approved or if more information is needed. Submit completed applications to Janet Helmcamp, [janet@helmcamp.com](mailto:janet@helmcamp.com) , PPE Chairperson.**

**Today's Date:** \_\_\_\_\_ **Your Email Address:** \_\_\_\_\_

**Title of Session:** \_\_\_\_\_

**Brief Description of Session: (300 words or less)**

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**If requested to present your session more than once, would you be willing to do so?**

\_\_\_\_\_ **Yes**      \_\_\_\_\_ **No**

**Name of Presenter: (use the name of the primary presenter responsible for contacting all other presenters)**

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**Chapter:** \_\_\_\_\_ **Chapter President:** \_\_\_\_\_ **Yes**    \_\_\_\_\_ **No**

**Presenter's Email:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

Presenter's Credentials:

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Name of Second Presenter: \_\_\_\_\_ Chapter: \_\_\_\_\_

Chapter President: \_\_\_\_ Yes \_\_\_\_ No Email: \_\_\_\_\_

Second Presenter's Credentials:

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Name of a member from your chapter who would facilitate your session. (Collect sign-in sheets & introduce)

\_\_\_\_\_ Email: \_\_\_\_\_

Consider this session for CPE credit approval? \_\_\_\_ Yes \_\_\_\_ No

Please list any potential scheduling conflicts we must consider when scheduling your session:

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**IMPORTANT: For technology, please bring your own computer/laptop and appropriate cords, HDMI or USB, to connect to TSO projectors.**

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FOR PPE COMMITTEE USE ONLY

Texas State Organization President's Signature: \_\_\_\_\_

Date: \_\_\_\_\_